Administrative Policies and Procedures: 14.26

Subject:	Multiple Response Assessment Track	
Approval:	,Commissioner	Approved Date:
Authority:	TCA 37-1-102; 37-1-131; 37-1-132; 37-1-168; 37-1-169; 37-5-105; 37-5-106; 37-5-601, et Seq.	
Standards:	DCS Practice Model Standards: 12-300; 12-301; COA: CPS 4.05	
Application:	To All Department of Children's Services Assessment Services and Family Crisis Intervention Program Services Employees	

Policy Statement:

Upon determination that a case meets criteria for the Multiple Response System Assessment Track, the Department of Children Services working with other public agencies, or community-based private agencies, which may include faith-based organizations shall offer needed services to children and families for meeting the needs of the family as appropriate.

Purpose:

To safeguard and enhance the welfare of children and to preserve family life, prevent harm and <u>abuse</u> to children by strengthening the ability of families to parent their children effectively through the multiple response system using available community-based public and private services.

Procedures:

A. Screening and assignment

- 1. Response Priorities are defined as:
 - a) Priority-1 (P-1): IMMEDIATE Twenty-Four (24) hours: Investigations assigned this priority must be initiated by face-to-face contact with the victim(s) immediately but no later than twenty-four (24) hours. Priority-1 reports allege that children may be in imminent danger.
 - b) Priority-2 (P-2): Forty-eight (48) hours: Investigations/assessments assigned this priority must be initiated by face-to-face contact with the victim within forty-eight (48) hours. Priority-2 reports allege injuries or risk of injuries that are not imminent or life threatening or do not require immediate medical care where a forty-eight (48) hour delay will not compromise the investigative effort or reduce the chances for identifying the level of risk to the child.
 - c) Priority-3 (P-3): Three (3) business days: investigations/assessments given this priority must be initiated by face-to-face contact with the victim within three (3) business days. Priority-3 are reports that allege situations/incidents considered to pose low risk of harm to the child

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- where three (3) business days will not compromise the investigative effort or reduce the chances for identifying the level of risk to the child.
- d) Refer to <u>Priority Response Definitions/Examples</u> for a listing of allegations of harm listed under each response priority.
- The CPSA worker shall follow Sections A, B, and D of DCS policy 14.5, Child Protective Services Planning, Initiation and Assessment of Safety and Protection for initiating good faith attempts.
- Contact by telephone with family to schedule appointment is preferred.
 However, child safety should never be jeopardized and should always be considered first.

B. Initial Assessment

1. Initial Assessment (First 30 days):

- a) Determination of service needs will be made by thirty (30) calendar days from date of referral.
- b) Must have at least two (2) face-to-face visits with the victim/family, unless it is determined that no services are needed or resources are provided.
- c) One (1) visit must be in the home.
- d) If a child comes into DCS custody prior to thirty (30) days from date of referral, CPS will initiate a Family Functional Assessment within five (5) business days.

2. No Services Needed

- a) Cases must be classified as no services needed within thirty (30) calendar days from date of referral.
- b) SDM forms, **CS-0740**, **CPS Investigation Summary and Classification Decision of Child Abuse/Neglect Referral**, and all documentation shall be entered into TNKids and completed as appropriate.
- Each region must establish written local protocols to notify the juvenile court with a summary of the results of every child abuse and neglect investigation.

3. Family Willing to Accept Services (Recommended) (Day 30 thru 60)

- a) A Family Services Team Meeting (FSTM) must be convened by thirty (30) calendar days after date of referral to determine services. Participants at the FSTM will include case worker, family and the family support team. Complete *Non-Custodial Permanency Plan (CS-0787*).
- b) There must be a minimum of two (2) face-to-face contacts per month with the victim. At least one (1) visit must be in the home. Each parent/caretaker(s) significant other and sibling(s) residing in the home must be seen at least one (1) time per month.
- c) Upon initiation of services, CPS will make contact with service providers every other week. Contact can be by telephone, e-mail or face-to-face.
- d) A Family Functional Assessment (FFA) will be initiated within thirty (30)

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calendar days of case assignment.

4. Services provided beyond 60 days

- a) The FSTM must be convened by sixty (60) calendar days after date of referral. Participants at the FSTM should include case worker, family and the family support team. Complete a new *Non-Custodial Permanency Plan (CS-0787)*.
- b) There must be a minimum of one (1) face-to-face contact in the home per month with the victim/family. Each victim, parent/caretaker(s) significant other and sibling(s) residing in the home must be seen at least one (1) time per month.
- c) There must be monthly contact with service providers for the life of the case. Contact may be by telephone, e-mail or face-to-face.
- 5. If need for services will continue beyond one hundred twenty (120) calendar days convene a FSTM with FSW and FSTL to transition to FSW. A FSTM will be convened ten (10) days prior to the one hundred twenty (120) day closure. CPS will provide copy of CPS file to FSW.

6. Case Closure

- a) SDM forms, **CS-0740**, **CPS Investigation Summary and Classification Decision of Child Abuse/Neglect Referral**, and all documentation shall be entered into TNKids and completed, as appropriate.
- b) Each region must establish written local protocols to notify the juvenile court with a summary of the results of every child abuse and neglect investigation.
- c) If services are no longer needed, case may be closed at any time.
- d) In accordance with TCA 37-5-604 (d), if the family does not cooperate with the provision of community-based public or private services or provide alternative services of its own to meet such needs, then the department shall assess whether further steps should be taken to assess needed services. If a family that declines services that are offered to them does not provide adequate alternative services of its own, the department shall inform the parents that their actions in declining services may be considered in future action by the department. All documentation shall be entered into TNKids as appropriate.

7. Family Willing to Accept Services (Required - Day 30 - 60)

- a) The FSTM must be convened by thirty (30) calendar days, after date of referral to determine services. Participants should include case worker, family and the family support team. Complete a *Non-Custodial Permanency Plan (CS-0787)*.
- b) There must be a minimum of two (2) face-to-face contacts per month beginning at thirty (30) calendar days with the victim. At least one (1) visit must be in the home. Each parent/caretaker(s) significant other and sibling(s) residing in the home must be seen at least one (1) time per month.
- c) Any additional visits will be addressed or identified in the Non-Custodial

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Permanency Plan (CS-0787).

- d) Upon initiation of services, CPS will make contact with service providers every other week. Contact may be made by telephone, e-mail or face-toface.
- e) A Family Functional Assessment (FFA) will be initiated within thirty (30) calendar days of case assignment.

8. Services provided beyond sixty (60) days

- a) The FSTM must be convened by sixty (60) calendar days after date of referral. Participants will include case worker, team leader, family and the family support team. Complete new *Non-Custodial Permanency Plan* (CS-0787).
- b) There must be a minimum of two (2) face-to-face contacts per month with the victim. At least one (1) visit must be in the home. Each parent/caretaker(s) significant other and sibling(s) residing in the home must be seen at least one (1) time per month.
- c) Upon initiation of services, CPS will make contact with service providers every other week. Contact can be by telephone, email, or face-to-face.
- 9. If need for services will continue beyond120 calendar days convene a FSTM with FSW and FSTL to transition to FSW. A FSTM will be convened ten (10) days prior to the one-hundred twenty (120) day closure. FSW will write a new NCPP with input from all FSTM participants. CPS will provide a copy of CPS file and the updated FFA to the FSW.

10. Case Closure

- a) SDM forms, CS-0740, CPS Investigation Summary and Classification
 Decision of Child Abuse/Neglect Referral, and all documentation shall be
 entered into TNKids and completed, as appropriate.
- b) Each region must establish written local protocols to notify the juvenile court with a summary of the results of every child abuse and neglect investigation.
- c) If services are no longer needed, case may be closed at any time.

11. Family Not Willing to Accept Services (Required)

- a) Case worker and Team Leader will consult to determine whether risk/safety factors exist.
- b) If Court does not order services, the case will be closed after consultation with Legal Counsel and TC for other options. Document in TNKids.
- c) If court does order services, there must be a minimum of two (2) face-to-face contacts per month from date of court order with the victim. At least one (1) visit must be in the home. Each parent/caretaker(s) significant other and sibling(s) residing in the home must be seen at least one (1) time per month.
- d) Any additional visits will be addressed or identified in the **Non-Custodial Permanency Plan (CS-0787)**.
- e) Upon initiation of services, CPS will make contact with service providers

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every other week. Contact can be by telephone, email, or face-to-face.

- f) FSTM may be held at any point during the life of the case as circumstances dictate, unless child comes into state custody.
- g) A CFTM must be held prior to filing a petition for state custody to explore all options, unless it is an emergency. The CFTM must be held prior to the seventy-two (72) hour preliminary hearing when an emergency removal has taken place. Team Coordinator (TC) must approve decision to petition for custody. Team Leader (TL) must attend CFTM. (Refer to DCS policy 31.7, Building, Preparing and Maintaining Child and Family Teams.)

C. Investigation referral on Open Assessment cases

- 1. If the CPS Assessor (CPSA) becomes aware of any child abuse not already being addressed by the CPSA, he/she will consult with the Supervisor to determine if there is a need to make a referral to Central Intake. If the issue that the CPSA is already addressing escalates, but does not warrant an investigation, the CPSA will consult with the Supervisor and continue to work with the case.
- If during the assessment case, an investigation referral on the family comes from Central Intake, CPS workers and the Supervisors may chose for the CPSA to collaborate and/or accompany the CPSI while the investigation is being conducted.
- 3. If multiple reports with the same information from different reporters are received on an open case and these reports contain no new allegations and are reported within thirty (30) days of the initial report, these multiple reports may be linked to the open case.
- 4. If the investigation allegations are unfounded, the investigation case will be closed and the CPSA will be notified of the outcome, and will resume with CPSA role.
- 5. If the investigation determines a need for additional services, the investigator will convene a FSTM and will initiate services. Participants at the FSTM should include the family, family supports, CPSA and their Supervisor. A new *Non-Custodial Permanency Plan (CS-0787)* is completed to address added services. CPSA resumes role and follow up with additional provided services.
- 6. A CFTM must be held prior to filing a petition for state custody to explore all options, unless it is an emergency. The CFTM must be held prior to the seventy-two (72) hour preliminary hearing when an emergency removal has taken place. Team Coordinator (TC) must approve decision to petition for custody. Team Leader (TL) must attend CFTM. (Refer to DCS policy 31.7, Building, Preparing and Maintaining Child and Family Teams.).

D. CPS referral on open non-CPS cases

- If the FSW becomes aware of any child abuse not already being addressed by the FSW, the FSW will make a referral to Central Intake. If the issue that the FSW is already working on escalates to a higher level, the FSW will consult with the FSTL and continue to work with the case.
- 2. If during the FSW case, a CPS referral on the family comes from Central Intake,

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the FSW, CPS worker and their Supervisors may:

- a) Chose for the FSW to collaborate and/or accompany the CPS worker while the investigation/assessment is being conducted. The FSW case is kept open and the FSW will resume upon CPS completion. FSW will follow up with additional services; OR
- b) Determine if the referral contains no new allegations and is sent back to Central Intake with a detailed explanation requesting a screen out.
- The FSW will collaborate with CPS worker while the investigation/assessment is being conducted. The FS case is kept open, and FSW will resume upon CPS completion.
- 4. If the allegations are unfounded or no services are needed, the CPS case will be closed and the FSW worker will be notified of the outcome, and will resume delivery of service.
- 5. If allegations are indicated and/or assessment determines there is a need for additional services, the CPS worker will convene a FSTM including the family, FSW worker, TLs and Family Support Team. A FS Case Plan will be completed by the FSW worker with input from CPS. The FS Case Plan will be worked within the requirements of the FSW case.
- 6. A CFTM must be held prior to filing a petition for state custody to explore all options, unless it is an emergency. The CFTM must be held prior to the seventy-two (72) hour preliminary hearing when an emergency removal has taken place. Team Coordinator (TC) must approve decision to petition for custody. Team Leader (TL) must attend CFTM. (Refer to DCS policy 31.7, Building, Preparing and Maintaining Child and Family Teams.)

E. Data system documentation

Unless other requirements are specified in policy for documentation, or events not documented elsewhere or requiring a broader explanation, all information required to be documented in case recordings must be entered within thirty (30) days from the date of the contact or occurrence.

Forms:

CS-0740, CPS Investigation Summary and Classification Decision of Child Abuse/Neglect Referral

CS-0787 Non-Custodial Permanency Plan

Collateral documents:

Work Aid 2 - CPS Tasks by Allegations

Priority Response Definitions-Examples

Glossary:		
Term	Definition	
Family:	The members of a household living, on a full-time or a part-time basis, in one (1) house, condominium, apartment or other dwelling; people related by blood or ancestry, marriage, or adoption; any person who is holding out to the public as being a family member of a minor; foster parents and foster children; stepparents and stepchildren; and any other group that the department determines by policy or rule to constitute a family.	
Multiple Response System Assessment Track:	The multi-level response system shall be designed to protect children from maltreatment through the effective use of available community-based public and private services. Upon receipt of a report of harm pursuant to § 37-1-403, the department shall make an initial screening decision using an approved screening instrument. If the report does not allege that the child has been harmed or that the child has been sexually abused, after reviewing the information available and using the screening instrument, the department shall determine whether the child is at risk of maltreatment. If the child is at risk of maltreatment, the department shall determine whether the appropriate level of intervention is:	
	◆ Investigation pursuant to title 37, chapter 1, <u>Tennessee Code Annotated</u> ;	
	 Assessment of the child and the family's need for and referral to available community-based public or private services; 	
	 Referral for available community-based public or private services without assessment or investigation; or (4) No further action by the department. 	